

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010246

FILED
Apr 12, 2008
Secretary of State

Entity Name: EXPECTATION ARTIST PRODUCTION, INC.

Current Principal Place of Business:

7501 S.W. 39 TERR
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

7501 S.W. 39 TERR
MIAMI, FL 33155

New Mailing Address:

FEI Number: 20-0428815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAZQUEZ, AMELIA
7501 SW 39TH TERRACE
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VAZQUEZ, AMELIA
Address: 7501 SW 39TH TERRACE
City-St-Zip: MIAMI, FL 33155

Title: D () Delete
Name: SUBIRANA, JUAN PABLO
Address: 1207 MARSEILLE #29
City-St-Zip: MIAMI BCH, FL 33141

Title: D () Delete
Name: HEREDIA, TERESITA R
Address: 5249 NW 7 ST APT 300
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMELIA VAZQUEZ

PRES

04/12/2008

Electronic Signature of Signing Officer or Director

Date